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APPLICANTS Samir Kumar, Penfield, NY; Thomas J. Budny, Penfield, NY; Brian S. Giannetto, Rochester, NY; Brian E. Moore, Ontario, NY; Scott M. Silence, Fairport, NY; Michael J. Duggan, Webster, NY; Bernard A. Kelly, Ontario, NY;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/03/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY NY	SHEETS DRAWING 0	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 4
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FILING FEE RECEIVED 1500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	